

## Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF VERMONT

Case number (if known)

Chapter

7☐ Check if this an amended filing

## Official Form 201

## Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Maple Leaf Farm Associates, Inc.

2. All other names debtor used in the last 8 years  
Include any assumed names, trade names and doing business as names

**FDBA Maple Leaf Counseling**  
**FDBA Maple Leaf Farm**  
**FDBA Maple Leaf Treatment Center**

3. Debtor's federal Employer Identification Number (EIN) 03-0195027

4. Debtor's address

Principal place of business	Mailing address, if different from principal place of business
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10 Maple Leaf Rd  
Underhill, VT 05489

Number, Street, City, State &amp; ZIP Code

Chittenden

County

10 Maple Leaf Rd  
Underhill, VT 05489

P.O. Box, Number, Street, City, State &amp; ZIP Code

Location of principal assets, if different from principal place of business

10 Maple Leaf Rd Underhil, VT 05489

Number, Street, City, State &amp; ZIP Code

5. Debtor's website (URL) \_\_\_\_\_

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: \_\_\_\_\_

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case Number (if known)

**7. Describe debtor's business****A. Check one:**

- ☒ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☐ None of the above

**B. Check all that apply**

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.**  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**624100****8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. **Check all that apply:**
- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- ☐ Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**☒ No☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case Number (if known)

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☐ No☒ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention? (Check all that apply.)**

- ☒ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

**Business provided overnight care facilities, kitchen area may of perishables; and property will required snow removal and heat verification as weather requires**

What is the hazard?

- ☐ It needs to be physically secured or protected from the weather.

- ☒ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

- ☒ Other **Heat and security.**

**Where is the property?****Colchester and Underhill locations**

Number, Street, City, State &amp; ZIP Code

**Is the property insured?**☐ No

- ☒ Yes. Insurance agency

**Checking with Merchants Bank**

Contact name

Phone

**Statistical and administrative information****13. Debtor's estimation of available funds**

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**☐ 1-49☒ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor

**Maple Leaf Farm Associates, Inc.**

Name

Case Number (if known)

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **February 21, 2017**

MM / DD / YYYY

X **/s/ Jeffrey M. Messina**

Signature of authorized representative of debtor

**Jeffrey M. Messina**

Printed name

Title **President**

**18. Signature of attorney**

X **/s/ Raymond J. Obuchowski**

Signature of attorney for debtor

Date **February 21, 2017**

MM / DD / YYYY

**Raymond J. Obuchowski**

Printed name

**Obuchowski Law Office**

Firm name

**PO Box 60**

**Bethel, VT 05032-0060**

Number, Street, City, State & ZIP Code

Contact phone **(802) 234-6244**

Email address **ray@oeblaw.com**

**955**

Bar number and State

MINUTES OF SPECIAL MEETING OF THE BOARD OF DIRECTORS OF MAPLE FARM  
ASSOCIATES, INC

Minutes of a Special Meeting of the Board of held at Colchester Vermont on the 14<sup>th</sup> day of February, 2017, at 6 P.M. in the evening of that day.

The President called the meeting to order, and called the roll of the Directors. The following Directors answered present:

Jeffrey Messina  
Jessica Bridge  
Keith G. Turman  
Michael Couture

The President was then elected to chair the meeting, and further requested Michael Couture to take the minutes of the meeting, as Secretary.

The President then stated that this meeting was called at the request of the Directors to consider the following business:

Whether the Corporation should file a petition for relief under Chapter 7 of the Bankruptcy Code.

The President then read the notice of a special meeting and stated that the Directors, then present, had waived notice thereof, in accordance with the By-Laws.

On motion duly made and carried, the notice was ordered spread upon the minutes. Thereupon and thereafter the current status of the shut down and steps necessary to wind up business were discussed. Further, the Board took up and discussed proceeding under Chapter 7 of the Bankruptcy Code for purposes of liquidation.

Thereafter, on motion duly made and carried, it was:

RESOLVED, that the Corporation proceed with the filing of a petition for relief under Chapter 7 of the Bankruptcy Code and the President is empowered to execute the petition for relief, and the officers of the Corporation are further empowered to execute, make and deliver any and all documents necessary to effectuate these purposes; and it further is,

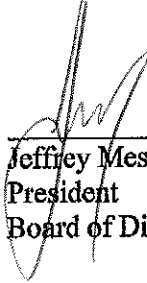
RESOLVED, that the Corporation retain the Obuchowski Law Office of Bethel, VT as its attorney to effectuate these purposes.

There being no further business, the meeting adjourned at 7:33 P.M.

DATED: Tuesday, February 14, 2017



Michael Couture,  
Secretary  
Board of Directors



Jeffrey Messina,  
President  
Board of Directors

Fill in this information to identify the case:

Debtor name Maple Leaf Farm Associates, Inc.

United States Bankruptcy Court for the: DISTRICT OF VERMONT

Case number (if known) \_\_\_\_\_

☐ Check if this is an  
amended filing

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property*(Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property*(Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases*(Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on February 21, 2017

X /s/ Jeffrey M. Messina

Signature of individual signing on behalf of debtor

Jeffrey M. Messina

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Maple Leaf Farm Associates, Inc.  
United States Bankruptcy Court for the: DISTRICT OF VERMONT  
Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

<b>1a. Real property:</b>	
Copy line 88 from Schedule A/B.....	\$ <u>1,919,900.00</u>
<b>1b. Total personal property:</b>	
Copy line 91A from Schedule A/B.....	\$ <u>509,027.20</u>
<b>1c. Total of all property:</b>	
Copy line 92 from Schedule A/B.....	\$ <u>2,428,927.20</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A Amount of claim, from line 3 of Schedule D.....	\$ <u>927,394.67</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b>	
Copy the total claims from Part 1 from line 5a of Schedule E/F.....	\$ <u>81,512.43</u>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b>	
Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	+\$ <u>128,489.89</u>
4. <b>Total liabilities</b> .....	
Lines 2 + 3a + 3b	\$ <u>1,137,396.99</u>



**Fill in this information to identify the case:**

Debtor name Maple Leaf Farm Associates, Inc.  
United States Bankruptcy Court for the: DISTRICT OF VERMONT  
Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206A/B

### Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor**

**Current value of debtor's interest**

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. The Merchants Bank Checking - Operating 0776 \$65,777.20

3.2. The Merchants Bank - (Per 10/31/16 balance sheet) MMA 0768 unknown

3.3. The Merchants Bank ( per 10/31/16 balance sheet ) ICS Operating Sweep 5908 unknown

3.4. The Merchants Bank ( per 10/31/16 balance sheet ) Capital Money Market 2332 unknown

3.5. The Merchants Bank ( per 10/31/16 balance sheet ) ICS Capital Sweep 6691 unknown

3.6. The Union Bank NOW account - Flex Spending Account 6691 \$17,100.00

**4. Other cash equivalents (Identify all)**

Debtor Maple Leaf Farm Associates, Inc. Case number (If known) \_\_\_\_\_  
Name

4.1. Pitney Bowes Postage Meter \$150.00

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$83,027.20

**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 332,000.00 - 0.00 = .... \$332,000.00  
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$332,000.00

**Part 4: Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.  
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies Office supplies and related business inventory Located at Colchester and Underhill		\$3,000.00		\$3,000.00

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (If known)

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

**\$3,000.00**

24. **Is any of the property listed in Part 5 perishable?**

- ☐ No  
☒ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current Value \_\_\_\_\_

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	<b>Office furniture</b> <b>Office furniture, desks, cars, and related office furnishings</b> <b>Located at Colchester and Underhill</b>	<b>\$20,000.00</b>		<b>\$20,000.00</b>
40.	<b>Office fixtures</b>			
41.	<b>Office equipment, including all computer equipment and communication systems equipment and software</b> <b>Business electronics, computers, servers, printers</b> <b>Located at Colchester and Underhill</b>	<b>\$15,000.00</b>		<b>\$15,000.00</b>

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

**\$35,000.00**

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☐ No  
☒ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (If known)

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. <b>Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1. <b>2014 Jeep Cherokee</b> <b>Not clear whether security interest or lease</b>	<b>\$14,000.00</b>		<b>\$14,000.00</b>
48. <b>Watercraft, trailers, motors, and related accessories</b> <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49. <b>Aircraft and accessories</b>			
50. <b>Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b> <b>John Deere Tractor</b>	<b>\$10,000.00</b>		<b>\$10,000.00</b>
<b>Cub Cadet Mower, related groundkeeping equipment</b> <b>Located at Underhill</b>	<b>\$10,000.00</b>		<b>\$10,000.00</b>
<b>2015 John Deere 6x4 Gator</b>	<b>\$7,500.00</b>		<b>\$7,500.00</b>
<b>John Deere 950M Zero Turn Mower</b>	<b>\$4,500.00</b>		<b>\$4,500.00</b>

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$46,000.00**

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☐ No  
☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Debtor Maple Leaf Farm Associates, Inc. Case number (If known) \_\_\_\_\_  
Name

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. <b>10-14 Maple Leaf Rd, Underhill, VT 05489</b>	<b>Fee Simple</b>	<b>\$1,919,900.00</b>	<b>Grand List - Tax</b>	<b>\$1,919,900.00</b>
55.2. <b>Lease of Colchester, 10 year lease with Fanny Allen Holdings Inc.</b>	<b>Lease</b>	<b>\$0.00</b>		<b>unknown</b>

56. **Total of Part 9.** **\$1,919,900.00**  
Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☐ No  
☒ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. <b>Patents, copyrights, trademarks, and trade secrets</b>			
61. <b>Internet domain names and websites</b>			
62. <b>Licenses, franchises, and royalties</b>			
63. <b>Customer lists, mailing lists, or other compilations</b>			
64. <b>Other intangibles, or intellectual property</b>			
65. <b>Goodwill Maple Leaf Farm, Maple Leaf Treatment names, and IP</b>	<b>\$10,000.00</b>		<b>\$10,000.00</b>

66. **Total of Part 10.** **\$10,000.00**  
Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?

- ☐ No  
☒ Yes

Debtor Maple Leaf Farm Associates, Inc. Case number (If known) \_\_\_\_\_  
Name

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes Fill in the information below.

Current value of  
debtor's interest

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

**Assets listed are to the best of the Board of Directors knowledge without complete access to the Company's financial and business records. Other Assets may exist including deposits, refunds, etc.**

unknown

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

Debtor Maple Leaf Farm Associates, Inc. Case number (If known) \_\_\_\_\_  
Name

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$83,027.20</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$332,000.00</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$3,000.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$35,000.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$46,000.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$1,919,900.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$10,000.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$509,027.20</u>	+ 91b. <u>\$1,919,900.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$2,428,927.20</u>

Fill in this information to identify the case:

Debtor name Maple Leaf Farm Associates, Inc.  
United States Bankruptcy Court for the: DISTRICT OF VERMONT  
Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	<p><b>Ally</b> Creditor's Name</p> <p><b>PO Box 380902</b> <b>Bloomington, MN</b> <b>55438-0902</b> Creditor's mailing address</p> <p>_____ Creditor's email address, if known</p> <p><b>Date debt was incurred</b></p> <p><b>Last 4 digits of account number</b> <b>7736</b></p> <p><b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p><b>Describe debtor's property that is subject to a lien</b> <b>2014 Jeep Cherokee</b> <b>Not clear whether security interest or lease</b></p> <p><b>Describe the lien</b></p> <p><b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p><b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<b>\$14,000.00</b>	<b>\$14,000.00</b>

2.2	<p><b>John Deere Financial</b> Creditor's Name</p> <p><b>PO Box 6600</b> <b>Johnston, IA 50131-6600</b> Creditor's mailing address</p> <p>_____ Creditor's email address, if known</p> <p><b>Date debt was incurred</b> <b>2015</b></p> <p><b>Last 4 digits of account number</b> <b>8957</b></p> <p><b>Do multiple creditors have an interest in the same property?</b></p>	<p><b>Describe debtor's property that is subject to a lien</b> <b>2015</b> <b>John Deere 6x4 Gator</b></p> <p><b>Describe the lien</b></p> <p><b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p><b>As of the petition filing date, the claim is:</b> Check all that apply</p>	<b>\$14,000.00</b>	<b>\$12,000.00</b>
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Debtor **Maple Leaf Farm Associates, Inc.**

Case number (if known)

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.3 The Merchants Bank**

Creditor's Name

Describe debtor's property that is subject to a lien

**\$887,774.10**

**\$1,919,900.00**

**10-14 Maple Leaf Rd, Underhill, VT 05489**

**275 Kennedy Dr Ste 100  
South Burlington, VT  
05403-6700**

Creditor's mailing address

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☐ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

**1. The Merchants Bank  
2. Town of Underhill**

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.4 Town of Colchester**

Creditor's Name

Describe debtor's property that is subject to a lien

**\$11,608.27**

**\$0.00**

**PO Box 55  
Colchester, VT 05446-0055**

Creditor's mailing address

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

**2016-2017**

Last 4 digits of account number

**3315**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.5 Town of Underhill**

Creditor's Name

Describe debtor's property that is subject to a lien

**\$12.30**

**\$1,919,900.00**

**Taxes due**

**PO Box 120  
Underhill, VT 05489-0120**

Creditor's mailing address

Describe the lien

Is the creditor an insider or related party?

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

Creditor's email address, if known

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

11/21/16

Last 4 digits of account number

L020

Do multiple creditors have an interest in the same property?

☐ No

☒ Yes. Specify each creditor, including this creditor and its relative priority.

1. The Merchants Bank

2. Town of Underhill

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$927,394.67**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Elizabeth Glynn, Esq.  
Ryan Smith and Carbine, Ltd.  
98 Merchants Row  
Rutland, VT 05701-5942

Line 2.3

John Deere Financial  
PO Box 4450  
Carol Stream, IL 60197-4450

Line 2.2

8957

Fill in this information to identify the case:

Debtor name Maple Leaf Farm Associates, Inc.  
United States Bankruptcy Court for the: DISTRICT OF VERMONT  
Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Aldolph Wells</b>  <b>8 Krug Rd</b> <b>Underhill, VT 05489-9426</b>  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,065.40</b>	<b>\$1,065.40</b>
2.2	Priority creditor's name and mailing address <b>Allison Mitchell</b>  <b>28 Countryside Dr</b> <b>Essex Junction, VT 05452-4354</b>  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,387.42</b>	<b>\$4,387.42</b>

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

2.3	Priority creditor's name and mailing address <b>Allison Thomson</b>  <b>57 E Country Club Dr # 27</b> <b>Jericho, VT 05465-3195</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,616.94</b>	<b>\$1,616.94</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.4	Priority creditor's name and mailing address <b>Anne Devos</b>  <b>499 White Rd</b> <b>Glover, VT 05839-9600</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,793.57</b>	<b>\$1,793.57</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.5	Priority creditor's name and mailing address <b>Ashely Corbitt</b>  <b>2 Perkins Dr</b> <b>Essex Junction, VT 05452-3858</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$502.92</b>	<b>\$502.92</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.6	Priority creditor's name and mailing address <b>Ashley Lafontaine</b>  <b>365 VT Route 15 Apt 4</b> <b>Jericho, VT 05465-2053</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,369.28</b>	<b>\$1,369.28</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

2.7	Priority creditor's name and mailing address <b>Barbara Bertocci</b>  <b>3 Westman Rd</b> <b>Cambridge, VT 05444-9750</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$140.00</b>	<b>\$140.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.8	Priority creditor's name and mailing address <b>Bridget Burleson</b>  <b>1179 Shenang Rd</b> <b>Enosburg Falls, VT 05450-5970</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,229.65</b>	<b>\$1,229.65</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.9	Priority creditor's name and mailing address <b>Catherine Iacuzzi</b>  <b>204 Urie Rd</b> <b>Jeffersonville, VT 05464-9897</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$7,211.69</b>	<b>\$7,211.69</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.10	Priority creditor's name and mailing address <b>Cathy Burghardt</b>  <b>914 Dugway Rd</b> <b>Richmond, VT 05477-9107</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,539.13</b>	<b>\$1,539.13</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

2.11	Priority creditor's name and mailing address <b>Caytlyn LeDuc</b>  <b>130 Browns River Rd</b> <b>Fairfax, VT 05454-9559</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,084.85</b>	<b>\$1,084.85</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.12	Priority creditor's name and mailing address <b>Cheri Coleman</b>  <b>43 Sweet Lndg</b> <b>Cambridge, VT 05444-9915</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$764.12</b>	<b>\$764.12</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.13	Priority creditor's name and mailing address <b>Christopher St. Cyr</b>  <b>PO Box 194</b> <b>Underhill, VT 05489-0194</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,026.87</b>	<b>\$1,026.87</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.14	Priority creditor's name and mailing address <b>Emily Colvin</b>  <b>130 Jeff Heights Rd Unit 201</b> <b>Jeffersonville, VT 05464-9696</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$342.77</b>	<b>\$342.77</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

2.15	Priority creditor's name and mailing address <b>Erin Durivage</b>  <b>501 Basswood Hill Rd</b> <b>Bakersfield, VT 05441-9703</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$247.25</b>	<b>\$247.25</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.16	Priority creditor's name and mailing address <b>Erin Hanlon</b>  <b>66 Hidden Pines Dr</b> <b>Richmond, VT 05477-9009</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$609.33</b>	<b>\$609.33</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.17	Priority creditor's name and mailing address <b>Evan Smith</b>  <b>PO Box 5193</b> <b>Essex Junction, VT 05453-5193</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,503.56</b>	<b>\$2,503.56</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.18	Priority creditor's name and mailing address <b>Hata Pasic</b>  <b>58 Red Oak Dr</b> <b>Colchester, VT 05446-6979</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,702.91</b>	<b>\$1,702.91</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

2.19	Priority creditor's name and mailing address <b>Hillary Moody</b>  <b>76 Route 100C</b> <b>Johnson, VT 05656</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,431.95</b>	<b>\$1,431.95</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

---

2.20	Priority creditor's name and mailing address <b>Jamie Pratt</b>  <b>346 Westman Rd</b> <b>Cambridge, VT 05444-9751</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$939.13</b>	<b>\$939.13</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.21	Priority creditor's name and mailing address <b>Jenn Lanphear</b>  <b>1437 S Main St</b> <b>Montgomery Center, VT</b> <b>05471-4406</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,966.60</b>	<b>\$3,966.60</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.22	Priority creditor's name and mailing address <b>Jennifer Lyons-Horne</b>  <b>500 Route 2</b> <b>South Hero, VT 05486-4219</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$736.00</b>	<b>\$736.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		



Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

2.23	Priority creditor's name and mailing address <b>Julia Emery</b>  <b>60 Winooski Falls Way</b> <b>Winooski, VT 05404-2248</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,123.30</b>	<b>\$1,123.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.24	Priority creditor's name and mailing address <b>Justin McGinnis</b>  <b>277 Poker Hill Rd</b> <b>Underhill, VT 05489-9612</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$442.83</b>	<b>\$442.83</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.25	Priority creditor's name and mailing address <b>Ken Johnson</b>  <b>116 Messenger St</b> <b>Saint Albans, VT 05478-1549</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,884.74</b>	<b>\$2,884.74</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.26	Priority creditor's name and mailing address <b>Kristen Emery</b>  <b>19 Green St # 102</b> <b>Milton, VT 05468-4540</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,674.83</b>	<b>\$2,674.83</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.27	Priority creditor's name and mailing address <b>Margaret Terrien</b>  <b>123 Rivers Edge Dr</b> <b>Burlington, VT 05408-1853</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,662.26</b>	<b>\$2,662.26</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.28	Priority creditor's name and mailing address <b>Marianne Santimore</b>  <b>PO Box 454</b> <b>Fairfax, VT 05454-0454</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,285.56</b>	<b>\$1,285.56</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.29	Priority creditor's name and mailing address <b>Mary Collett</b>  <b>97 1/2 Intervale Ave</b> <b>Burlington, VT 05401-4204</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,037.31</b>	<b>\$2,037.31</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.30	Priority creditor's name and mailing address <b>Megan DeVinny</b>  <b>94 Woods Rd Apt Rove</b> <b>Isle La Motte, VT 05463-6302</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,209.28</b>	<b>\$1,209.28</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.31	Priority creditor's name and mailing address <b>Melinda Swenor</b>  <b>1133 South Rd Apt B</b> <b>Williston, VT 05495-8709</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,586.43</b>	<b>\$1,586.43</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.32	Priority creditor's name and mailing address <b>Michelle Guay</b>  <b>17 Winter Ln</b> <b>Milton, VT 05468-2901</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,085.31</b>	<b>\$3,085.31</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.33	Priority creditor's name and mailing address <b>Michelle Robert</b>  <b>5496 E Sheldon Rd</b> <b>Enosburg Falls, VT 05450-9700</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$3,016.01</b>	<b>\$3,016.01</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.34	Priority creditor's name and mailing address <b>Patrick Sick</b>  <b>163 River St</b> <b>Montpelier, VT 05602-3810</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$270.15</b>	<b>\$270.15</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.35	Priority creditor's name and mailing address <b>Paul Bertocci</b>  <b>3 Westman Rd</b> <b>Cambridge, VT 05444-9750</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,749.50</b>	<b>\$2,749.50</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.36	Priority creditor's name and mailing address <b>Raelene Begin</b>  <b>PO Box 63</b> <b>Beecher Falls, VT 05902-0063</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$280.28</b>	<b>\$280.28</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.37	Priority creditor's name and mailing address <b>Sarah-Ashley Simmons</b>  <b>905 S Prospect St</b> <b>Burlington, VT 05401-6101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,056.04</b>	<b>\$1,056.04</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.38	Priority creditor's name and mailing address <b>Shauna Moustakas</b>  <b>198 McGuire Pent Rd</b> <b>Charlotte, VT 05445-9116</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$6,110.06</b>	<b>\$6,110.06</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.39	Priority creditor's name and mailing address <b>Sheridan Weir</b>  <b>87 Seymour St</b> <b>Williston, VT 05495-7990</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,327.20</b>	<b>\$4,327.20</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.40	Priority creditor's name and mailing address <b>Sprague Simonds</b>  <b>112 S Main St # 119</b> <b>Stowe, VT 05672-5406</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$7,500.00</b>	<b>\$7,500.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.41	Priority creditor's name and mailing address <b>Uku Meri</b>  <b>2696 Elm St</b> <b>Montpelier, VT 05602-9495</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,000.00</b>	<b>\$1,000.00</b>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address <b>Acorn Marketing</b>  <b>2920 Sugarberry Ln</b> <b>Johns Island, SC 29455-6708</b> Date(s) debt was incurred <u>10/28/16</u> Last 4 digits of account number <u>8351</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$300.00</b>
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3.2	Nonpriority creditor's name and mailing address <b>AlcoPro</b>  <b>PO Box 10954</b> <b>Knoxville, TN 37939-0954</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$291.00</b>
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Debtor **Maple Leaf Farm Associates, Inc.**  
Name

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3.3	<p>Nonpriority creditor's name and mailing address <b>Artisan Floorcovering</b></p> <p><b>169 Hemlock HI</b> <b>Jeffersonville, VT 05464-9908</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$808.00</b>
3.4	<p>Nonpriority creditor's name and mailing address <b>Autosmith</b></p> <p><b>15 N Main St</b> <b>Jericho, VT 05465-4418</b></p> <p>Date(s) debt was incurred <u>12/28/16</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$20.30</b>
3.5	<p>Nonpriority creditor's name and mailing address <b>Bergeron Paradis Fitzpatrick</b></p> <p><b>34 Pearl St</b> <b>Essex Junction, VT 05452-3605</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$5,934.74</b>
3.6	<p>Nonpriority creditor's name and mailing address <b>Black River Produce</b></p> <p><b>449 River St</b> <b>North Springfield, VT 05150-9756</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>9589</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$454.55</b>
3.7	<p>Nonpriority creditor's name and mailing address <b>Bugbee Excavating and Plowing LLC</b></p> <p><b>5 S Main St</b> <b>Jericho, VT 05465-2553</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,470.00</b>
3.8	<p>Nonpriority creditor's name and mailing address <b>Burlington Free Press</b></p> <p><b>100 Bank St Ste 700</b> <b>Burlington, VT 05401-4946</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>1887</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$40.93</b>
3.9	<p>Nonpriority creditor's name and mailing address <b>C and G Laundry</b></p> <p><b>28 Forest Rd</b> <b>Essex Junction, VT 05452-3819</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$556.25</b>

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3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Casella Waste Systems, Inc.</b>  <b>PO Box 1372</b> <b>Williston, VT 05495-1372</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number <u>1154</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$428.59</b>	
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Chevalier Drilling Co. Inc.</b>  <b>PO Box 164</b> <b>Highgate Springs, VT 05460-0164</b> Date(s) debt was incurred <u>09/01/16</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$548.86</b>	
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Cleantech Building Maintenance Inc.</b>  <b>PO Box 834</b> <b>Colchester, VT 05446-0834</b> Date(s) debt was incurred <u>2016</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,580.00</b>	
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Comstock Cleaning Service Inc.</b>  <b>PO Box 581</b> <b>Saint Albans, VT 05478-0581</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$925.00</b>	
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Cumming Electrical</b>  <b>80 Ethan Allen Dr</b> <b>South Burlington, VT 05403-5971</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$586.74</b>	
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Deb Richter, MD</b>  <b>PO Box 1467</b> <b>Montpelier, VT 05601-1467</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,187.50</b>	
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>E&amp;M Mechanical, Inc.</b>  <b>41 Commerce Ave Ste 1</b> <b>South Burlington, VT 05403-5833</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,731.00</b>	

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3.17	<p>Nonpriority creditor's name and mailing address <b>ExxonMobil</b></p> <p><b>PO Box 6404</b> <b>Sioux Falls, SD 57117-6404</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>4883</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$448.49</b>
3.18	<p>Nonpriority creditor's name and mailing address <b>Foley Distributing</b></p> <p><b>PO Box 99</b> <b>Rutland, VT 05702-0099</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>8101</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,609.77</b>
3.19	<p>Nonpriority creditor's name and mailing address <b>Foley Services Inc.</b></p> <p><b>PO Box 99</b> <b>Rutland, VT 05702-0099</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>7001</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$945.64</b>
3.20	<p>Nonpriority creditor's name and mailing address <b>Green Mountain Power</b></p> <p><b>163 Acorn Ln</b> <b>Colchester, VT 05446-5815</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>0009</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$2,593.18</b>
3.21	<p>Nonpriority creditor's name and mailing address <b>Hartigan Company</b></p> <p><b>31 Welch Park Dr</b> <b>Middlesex, VT 05602</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$3,719.50</b>
3.22	<p>Nonpriority creditor's name and mailing address <b>Healthdirect</b></p> <p><b>29 E Main St</b> <b>Gouverneur, NY 13642-1401</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>0248</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$19,898.16</b>
3.23	<p>Nonpriority creditor's name and mailing address <b>Jerihill Ace Hardware</b></p> <p><b>PO Box 298</b> <b>Jericho, VT 05465-0298</b></p> <p>Date(s) debt was incurred <u>10/3/16</u></p> <p>Last 4 digits of account number <u>7063</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$698.09</b>



Debtor **Maple Leaf Farm Associates, Inc.**  
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Case number (if known)

3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Johnson Hardware &amp; Rental</b>  <b>1442 VT Route 15 W</b> <b>Johnson, VT 05656-9647</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number <u>2911</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,242.74</b>
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Lowe's Credit Services</b>  <b>PO Box 965054</b> <b>Orlando, FL 32896-5054</b> Date(s) debt was incurred <u>1-13-17</u> Last 4 digits of account number <u>6967</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$384.38</b>
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>McKesson Medical Surgical</b>  <b>9954 Mayland Dr Ste 4000</b> <b>Richmond, VA 23233-1484</b> Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>0751</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$412.11</b>
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>McSoley, McCoy &amp; Co.</b>  <b>118 Tilley Dr Ste 202</b> <b>South Burlington, VT 05403-4450</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number <u>9975</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,550.00</b>
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>Mountain Air Systems Inc.</b>  <b>430 Commerce St Ste 220</b> <b>Williston, VT 05495-8126</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number <u>P003</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,115.07</b>
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Nextgen Heathcare</b>  <b>18111 Von Karman Ave Ste 800</b> <b>Irvine, CA 92612-7111</b> Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number <u>7535</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$506.46</b>
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Paychex of NY LLC</b>  <b>1175 John St</b> <b>West Henrietta, NY 14586-9102</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>unknown</b>

Debtor	<b>Maple Leaf Farm Associates, Inc.</b> <small>Name</small>	Case number (if known) _____
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3.31	<b>Nonpriority creditor's name and mailing address</b> <b>People Making Good PR</b>  <b>30 Main St Ste 325B</b> <b>Burlington, VT 05401-8438</b>  Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$8,800.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.32	<b>Nonpriority creditor's name and mailing address</b> <b>Peregrine Design</b>  <b>49 Commerce Ave Unit A1</b> <b>South Burlington, VT 05403-5852</b>  Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$340.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.33	<b>Nonpriority creditor's name and mailing address</b> <b>PestPro</b>  <b>PO Box 609</b> <b>South Hero, VT 05486-0609</b>  Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$150.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.34	<b>Nonpriority creditor's name and mailing address</b> <b>Philadelphia Insurance Company</b>  <b>PO Box 70251</b> <b>Philadelphia, PA 19176-0251</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>1258</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$4,101.25</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.35	<b>Nonpriority creditor's name and mailing address</b> <b>Pittney Bowes</b> <b>Purchase Power</b> <b>2225 American Dr</b> <b>Neenah, WI 54956-1005</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>7796</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$487.94</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.36	<b>Nonpriority creditor's name and mailing address</b> <b>Pro-Tech</b>  <b>80 Ethan Allen Dr</b> <b>South Burlington, VT 05403-5971</b>  Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number <u>1270</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$240.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.37	<b>Nonpriority creditor's name and mailing address</b> <b>Reinhart FoodService, Inc.</b>  <b>PO Box 8654</b> <b>Essex, VT 05451-8654</b>  Date(s) debt was incurred <u>2016-2017</u> Last 4 digits of account number <u>1311</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$1,780.60</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

3.38	<p>Nonpriority creditor's name and mailing address <b>SecurShred</b></p> <p><b>472 Meadowland Dr</b> <b>South Burlington, VT 05403-4468</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>    </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>    </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$300.00</b>
3.39	<p>Nonpriority creditor's name and mailing address <b>Sigmund Software</b></p> <p><b>83 Wooster Hts</b> <b>Danbury, CT 06810-7548</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>    </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>    </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$5,586.03</b>
3.40	<p>Nonpriority creditor's name and mailing address <b>Slate Communication</b></p> <p><b>511 School St</b> <b>Belmont, MA 02478-3703</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>    </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>    </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$2,967.00</b>
3.41	<p>Nonpriority creditor's name and mailing address <b>SymQuest</b></p> <p><b>30 Community Dr Ste 5</b> <b>South Burlington, VT 05403-6834</b></p> <p>Date(s) debt was incurred <u>11/16 - 1/17</u></p> <p>Last 4 digits of account number <u>0270</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>    </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$13,192.04</b>
3.42	<p>Nonpriority creditor's name and mailing address <b>Syncb/Amazon PLCC</b></p> <p><b>PO Box 965055</b> <b>Orlando, FL 32896-5055</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>5262</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>    </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,217.32</b>
3.43	<p>Nonpriority creditor's name and mailing address <b>The University of Vermont Medical Center</b></p> <p><b>111 Colchester Ave</b> <b>Burlington, VT 05401-1473</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>    </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>    </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$53.56</b>
3.44	<p>Nonpriority creditor's name and mailing address <b>Thomas Somers, Esq.</b></p> <p><b>PO Box 959</b> <b>Montpelier, VT 05601-0959</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>    </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>    </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,275.00</b>

Debtor **Maple Leaf Farm Associates, Inc.**  
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3.45	<p>Nonpriority creditor's name and mailing address <b>TwinState Technologies</b></p> <p><b>291 Rand Hill Rd</b> <b>Morrisonville, NY 12962-3820</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$800.16</b>
3.46	<p>Nonpriority creditor's name and mailing address <b>Unifirst</b></p> <p><b>30 Tigan St</b> <b>Winooski, VT 05404-1326</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>2567</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$4,494.56</b>
3.47	<p>Nonpriority creditor's name and mailing address <b>Union Office</b></p> <p><b>226 Andover St</b> <b>Wilmington, MA 01887-1022</b></p> <p>Date(s) debt was incurred <u>          </u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$6,665.78</b>
3.48	<p>Nonpriority creditor's name and mailing address <b>Verizon</b></p> <p><b>PO Box 4003</b> <b>Acworth, GA 30101-9004</b></p> <p>Date(s) debt was incurred <u>11-22-16</u></p> <p>Last 4 digits of account number <u>9932</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$472.66</b>
3.49	<p>Nonpriority creditor's name and mailing address <b>Vermont Gas</b></p> <p><b>PO Box 467</b> <b>Burlington, VT 05402-0467</b></p> <p>Date(s) debt was incurred <u>1/4/17</u></p> <p>Last 4 digits of account number <u>2028</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,899.09</b>
3.50	<p>Nonpriority creditor's name and mailing address <b>VT SafetyNet Inc.</b></p> <p><b>130 Pheasant Woods Apt 200</b> <b>Colchester, VT 05446-1895</b></p> <p>Date(s) debt was incurred <u>2017</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,320.00</b>
3.51	<p>Nonpriority creditor's name and mailing address <b>WB Mason</b></p> <p><b>59 Centre St</b> <b>Brockton, MA 02301-4014</b></p> <p>Date(s) debt was incurred <u>2016-2017</u></p> <p>Last 4 digits of account number <u>4342</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>          </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$1,359.85</b>

Debtor **Maple Leaf Farm Associates, Inc.**  
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3.52 Nonpriority creditor's name and mailing address

**Zatz & Renfrew Consulting****PO Box 1274  
Montpelier, VT 05601-1274**Date(s) debt was incurred **2016-2017**

Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

**\$5,000.00**

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

Basis for the claim: \_\_\_\_\_

Is the claim subject to offset? ☒ No ☐ Yes**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Burlington Free Press PO Box 742621 Cincinnati, OH 45274-2621</b>	Line <b>3.8</b> <input type="checkbox"/> Not listed. Explain _____	<b>1887</b>
4.2	<b>Exxonmobil PO Box 78001 Phoenix, AZ 85062-8001</b>	Line <b>3.17</b> <input type="checkbox"/> Not listed. Explain _____	<b>4883</b>
4.3	<b>Green Mountain Power PO Box 1611 Brattleboro, VT 05302-1611</b>	Line <b>3.20</b> <input type="checkbox"/> Not listed. Explain _____	<b>0009</b>
4.4	<b>HealthDirect PO Box 988 Buffalo, NY 14240-0988</b>	Line <b>3.22</b> <input type="checkbox"/> Not listed. Explain _____	<b>0248</b>
4.5	<b>McKesson Medical Surgical PO Box 933027 Atlanta, GA 31193-3027</b>	Line <b>3.26</b> <input type="checkbox"/> Not listed. Explain _____	<b>0751</b>
4.6	<b>Purchase Power PO Box 371874 Pittsburgh, PA 15250-7874</b>	Line <b>3.35</b> <input type="checkbox"/> Not listed. Explain _____	<b>7796</b>
4.7	<b>Quality Systems Agt for Nextgen PO Box 809390 Chicago, IL 60680-9390</b>	Line <b>3.29</b> <input type="checkbox"/> Not listed. Explain _____	<b>7535</b>
4.8	<b>Sync/Amazon PO Box 530958 Atlanta, GA 30353-0958</b>	Line <b>3.42</b> <input type="checkbox"/> Not listed. Explain _____	<b>5262</b>
4.9	<b>Verizon PO Box 15062 Albany, NY 12212-5062</b>	Line <b>3.48</b> <input type="checkbox"/> Not listed. Explain _____	<b>9932</b>
4.10	<b>Vermont Gas Systems PO Box 22082 Albany, NY 12201-2082</b>	Line <b>3.49</b> <input type="checkbox"/> Not listed. Explain _____	<b>2028</b>

Debtor **Maple Leaf Farm Associates, Inc.**  
Name

Case number (if known)

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>81,512.43</u>
5b.	+ \$ <u>128,489.89</u>
5c.	\$ <u>210,002.32</u>

Fill in this information to identify the case:

Debtor name Maple Leaf Farm Associates, Inc.

United States Bankruptcy Court for the: DISTRICT OF VERMONT

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest  
**Lease of Colchester property ( Copy of lease was not available for terms)**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Fanny Allen Holdings, Inc.;**  
**790 College Pkwy**  
**Colchester, VT 05446-3007**

2.2. State what the contract or lease is for and the nature of the debtor's interest  
**Payroll services**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Paychex of New York LLC**  
**1175 John St**  
**West Henrietta, NY 14586-9102**

**Fill in this information to identify the case:**

Debtor name Maple Leaf Farm Associates, Inc.  
United States Bankruptcy Court for the: DISTRICT OF VERMONT  
Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
☐ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

**Column 1: Codebtor**

**Column 2: Creditor**

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G



**Fill in this information to identify the case:**

Debtor name Maple Leaf Farm Associates, Inc.  
United States Bankruptcy Court for the: DISTRICT OF VERMONT  
Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

☐ None.

**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year**

**Sources of revenue**  
Check all that apply

**Gross revenue**  
(before deductions and exclusions)

**For prior year:**  
From 7/01/2016 to **Filing Date**

☒ Operating a business  
☐ Other \_\_\_\_\_

\$1,111,814.56

**For year before that:**  
From 7/01/2015 to 6/30/2016

☒ Operating a business  
☐ Other \_\_\_\_\_

\$4,079,549.00

**For the fiscal year:**  
From 7/01/2014 to 6/30/2015

☒ Operating a business  
☐ Other \_\_\_\_\_

\$3,619,504.00

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

**Creditor's Name and Address**

**Dates**

**Total amount of value**

**Reasons for payment or transfer**  
*Check all that apply*

Debtor **Maple Leaf Farm Associates, Inc.**

Case number (if known)

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <b>Union Office</b> <b>226 Andover St</b> <b>Wilmington, MA 01887-1022</b>	<b>12/15/16</b>	<b>\$8,189.92</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other ___
3.2. <b>Sigmund Software</b> <b>83 Wooster Hts</b> <b>Danbury, CT 06810-7548</b>	<b>December 2, 2016</b>	<b>\$4,043.82</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other ___
3.3. <b>Unknown</b>	<b>Other payments may exist when complete check register is accessible.</b>	<b>\$0.00</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. <b>Unknown</b>	<b>There may be payments to former management (insiders) including salary but cannot verify until access to check registers.</b>	<b>\$0.00</b>	

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

Debtor Maple Leaf Farm Associates, Inc.

Case number (if known) \_\_\_\_\_

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **Maple Leaf Farm Associates, Inc.**

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<b>Obuchowski Law Office PO Box 60 Bethel, VT 05032-0060</b>	<b>\$10,335, representing \$10,000 for legal fees, \$335 for filing fee.</b>	<b>February 15, 2016</b>	<b>\$10,335.00</b>

Email or website address

Who made the payment, if not debtor?

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

☐ No.

☒ Yes. State the nature of the information collected and retained.

Debtor **Maple Leaf Farm Associates, Inc.**

Case number (if known)

**Both employee records for PII, and medical records of patients.**

Does the debtor have a privacy policy about that information?

☐ No☒ Yes**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☒ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	<b>Oppenheimer Funds PO Box 5270 Denver, CO 80217-5270</b>	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input checked="" type="checkbox"/> Other <u>Investment Account</u>	<b>Closed and funds used for operations - 2016/2017 - Unsure of last balance due to unavailable financial records, as of 10/31/16 balance was \$181,836</b>	<b>\$0.00</b>
18.2.	<b>Edward Jones 12555 Manchester Rd Des Peres, MO 63131-3710</b>	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input checked="" type="checkbox"/> Other <u>Investment</u>	<b>Closed and funds used for operations - 2016/2017 - Unsure of last balance due to unavailable financial records, as of 10/31/16 balance was \$11,094.60</b>	<b>\$0.00</b>

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address

Names of anyone with access  
to it

Description of the contents

Do you still  
have it?**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**☐ No.☐ Yes. Provide details below.Case title  
Case numberCourt or agency name and  
address

Nature of the case

Status of case

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**☐ No.☐ Yes. Provide details below.

Site name and address

Governmental unit name and  
address

Environmental law, if known

Date of notice

**24. Has the debtor notified any governmental unit of any release of hazardous material?**☐ No.☐ Yes. Provide details below.

Site name and address

Governmental unit name and  
address

Environmental law, if known

Date of notice

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. <b>McSoley, McCoy &amp; Co.</b> <b>118 Tilley Dr Ste 202</b> <b>South Burlington, VT 05403-4450</b>	<b>Year to Year</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address
------------------

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>Jeffrey Messina, Esq.</b>	<b>34 Pearl St</b> <b>Essex Junction, VT 05452-3605</b>	<b>Director and President</b>	<b>0</b>
Name	Address	Position and nature of any interest	% of interest, if any
<b>Jessica Bridge</b>	<b>10 Maple Leaf Rd</b> <b>Underhill, VT 05489</b>	<b>Director and Vice President</b>	<b>0</b>
Name	Address	Position and nature of any interest	% of interest, if any
<b>Keith G. Turman</b>	<b>10 Maple Leaf Rd</b> <b>Underhill, VT 05489</b>	<b>Director and Treasurer</b>	<b>0</b>
Name	Address	Position and nature of any interest	% of interest, if any
<b>Michael Couture</b>	<b>10 Maple Leaf Rd.</b> <b>Underhill, VT 05489</b>	<b>Director</b>	<b>0</b>

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No
- ☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Catherine M. Iacuzzi	10 Maple Leaf Rd Underhill, VT 05489	Executive Director	
Terry Girouard	10 Maple Leaf Rd Underhill, VT 05489	President	
John Moran	10 Maple Leaf Rd. Underhill, VT 05489	Vice President	
Therese Johansson	10 Maple Leaf Rd Underhill, VT 05489	Chief Financial Officer	
William Clark	10 Maple Leaf Rd Underhill, VT 05489	Director	

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
- ☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Unknown			
Relationship to debtor Salary was paid to Executive Director, amounts and possible payments to others not known until full availability to financial records.			

31. **Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☒ No
- ☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--



Debtor Maple Leaf Farm Associates, Inc.

Case number (if known) \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☐ No☒ Yes. Identify below.

Name of the parent corporation

Maple Leaf Farm Associates, Inc. 401(k) - Nationwide Financial

Employer Identification number of the parent corporation

EIN: 03-0195027

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on February 21, 2017/s/ Jeffrey M. Messina

Signature of individual signing on behalf of the debtor

Jeffrey M. Messina

Printed name

Position or relationship to debtor PresidentAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207)* attached?☒ No☐ Yes

**United States Bankruptcy Court  
District of Vermont**

In re **Maple Leaf Farm Associates, Inc.**

Debtor(s)

Case No.

Chapter

**7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>10,000.00</b>
Prior to the filing of this statement I have received .....	\$	<b>10,000.00</b>
Balance Due .....	\$	<b>0.00</b>

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**See retainer letter as to the terms and conditions of the engagement and for the terms of payment. Counsel has received the amount set forth in this statement, and under the retainer letter reserves the right to charge for additional services on an hourly basis as described within the retainer agreement.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Adversary proceedings and contested matters are not included in the fee as set forth in the retainer letter. Tax advice is also specifically excluded.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**February 21, 2017**

*Date*

**/s/ Raymond J. Obuchowski**

**Raymond J. Obuchowski**

*Signature of Attorney*

**Obuchowski Law Office**

**PO Box 60**

**Bethel, VT 05032-0060**

**(802) 234-6244 Fax: (802) 234-6245**

**ray@oeblaw.com**

*Name of law firm*

IN RE:

Case No. \_\_\_\_\_

Maple Leaf Farm Associates, Inc.

Chapter 7

Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: February 21, 2017 Signature: /s/ Jeffrey M. Messina  
Jeffrey M. Messina, President Debtor

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
Joint Debtor, if any

Acorn Marketing  
2920 Sugarberry Ln  
Johns Island, SC 29455-6708

AlcoPro  
PO Box 10954  
Knoxville, TN 37939-0954

Aldolph Wells  
8 Krug Rd  
Underhill, VT 05489-9426

Allison Mitchell  
28 Countryside Dr  
Essex Junction, VT 05452-4354

Allison Thomson  
57 E Country Club Dr # 27  
Jericho, VT 05465-3195

Ally  
PO Box 380902  
Bloomington, MN 55438-0902

Anne Devos  
499 White Rd  
Glover, VT 05839-9600

Artisan Floorcovering  
169 Hemlock Hl  
Jeffersonville, VT 05464-9908

Ashely Corbitt  
2 Perkins Dr  
Essex Junction, VT 05452-3858

Ashley Lafontaine  
365 VT Route 15 Apt 4  
Jericho, VT 05465-2053

Autosmith  
15 N Main St  
Jericho, VT 05465-4418

Barbara Bertocci  
3 Westman Rd  
Cambridge, VT 05444-9750

Bergeron Paradis Fitzpatrick  
34 Pearl St  
Essex Junction, VT 05452-3605

Black River Produce  
449 River St  
North Springfield, VT 05150-9756

Bridget Burleson  
1179 Shenang Rd  
Enosburg Falls, VT 05450-5970

Bugbee Excavating and Plowing LLC  
5 S Main St  
Jericho, VT 05465-2553

Burlington Free Press  
PO Box 742621  
Cincinnati, OH 45274-2621

Burlington Free Press  
100 Bank St Ste 700  
Burlington, VT 05401-4946

C and G Laundry  
28 Forest Rd  
Essex Junction, VT 05452-3819

Casella Waste Systems, Inc.  
PO Box 1372  
Williston, VT 05495-1372

Catherine Iacuzzi  
204 Urie Rd  
Jeffersonville, VT 05464-9897

Cathy Burghardt  
914 Dugway Rd  
Richmond, VT 05477-9107

Caytlyn LeDuc  
130 Browns River Rd  
Fairfax, VT 05454-9559

Cheri Coleman  
43 Sweet Lndg  
Cambridge, VT 05444-9915

Chevalier Drilling Co. Inc.  
PO Box 164  
Highgate Springs, VT 05460-0164

Christopher St. Cyr  
PO Box 194  
Underhill, VT 05489-0194

Cleantech Building Maintenance Inc.  
PO Box 834  
Colchester, VT 05446-0834

Comstock Cleaning Service Inc.  
PO Box 581  
Saint Albans, VT 05478-0581

Cumming Electrical  
80 Ethan Allen Dr  
South Burlington, VT 05403-5971

Deb Richter, MD  
PO Box 1467  
Montpelier, VT 05601-1467

E&M Mechanical, Inc.  
41 Commerce Ave Ste 1  
South Burlington, VT 05403-5833

Elizabeth Glynn, Esq.  
Ryan Smith and Carbine, Ltd.  
98 Merchants Row  
Rutland, VT 05701-5942

Emily Colvin  
130 Jeff Heights Rd Unit 201  
Jeffersonville, VT 05464-9696

Erin Durivage  
501 Basswood Hill Rd  
Bakersfield, VT 05441-9703

Erin Hanlon  
66 Hidden Pines Dr  
Richmond, VT 05477-9009



Evan Smith  
PO Box 5193  
Essex Junction, VT 05453-5193

ExxonMobil  
PO Box 6404  
Sioux Falls, SD 57117-6404

Exxonmobil  
PO Box 78001  
Phoenix, AZ 85062-8001

Fanny Allen Holdings, Inc.;  
790 College Pkwy  
Colchester, VT 05446-3007

Foley Distributing  
PO Box 99  
Rutland, VT 05702-0099

Foley Services Inc.  
PO Box 99  
Rutland, VT 05702-0099

Green Mountain Power  
PO Box 1611  
Brattleboro, VT 05302-1611

Green Mountain Power  
163 Acorn Ln  
Colchester, VT 05446-5815

Hartigan Company  
31 Welch Park Dr  
Middlesex, VT 05602

Hata Pasic  
58 Red Oak Dr  
Colchester, VT 05446-6979

Healthdirect  
29 E Main St  
Gouverneur, NY 13642-1401

HealthDirect  
PO Box 988  
Buffalo, NY 14240-0988

Hillary Moody  
76 Route 100C  
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